

**United States Bankruptcy Court
Northern District of Illinois**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Daniel, Ronald		Name of Joint Debtor (Spouse) (Last, First, Middle): King, Shana																					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																					
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 9708		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 3340																					
Street Address of Debtor (No. & Street, City, State & Zip Code): 5820 Huron St Berkeley, IL		Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 5820 Huron St Berkeley, IL																					
ZIPCODE 60163		ZIPCODE 60163																					
County of Residence or of the Principal Place of Business: Cook		County of Residence or of the Principal Place of Business: Cook																					
Mailing Address of Debtor (if different from street address)		Mailing Address of Joint Debtor (if different from street address):																					
		ZIPCODE																					
Location of Principal Assets of Business Debtor (if different from street address above):		ZIPCODE																					
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other																					
		Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).																					
		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 13 Nonmain Proceeding																					
		Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.																					
Filing Fee (Check one box)		Chapter 11 Debtors																					
<input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																					
Statistical/Administrative Information																							
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																							
Estimated Number of Creditors <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000- 5,000</td> <td>5,001- 10,000</td> <td>10,001- 25,000</td> <td>25,001- 50,000</td> <td>50,001- 100,000</td> <td>Over 100,000</td> </tr> </table>				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-49	50-99	100-199	200-999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
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Estimated Assets <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
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Estimated Liabilities <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
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THIS SPACE IS FOR COURT USE ONLY																							

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Daniel, Ronald & King, Shana
Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)		
Location Where Filed: None	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)		
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		X /s/ Nicolette Robovsky <small>Signature of Attorney for Debtor(s)</small>
		10/24/08 <small>Date</small>
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
Information Regarding the Debtor - Venue <small>(Check any applicable box.)</small> <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
Certification by a Debtor Who Resides as a Tenant of Residential Property <small>(Check all applicable boxes.)</small> <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) <small>(Name of landlord or lessor that obtained judgment)</small> <small>(Address of landlord or lessor)</small> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).		

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Daniel, Ronald & King, Shana**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Ronald Daniel

Signature of Debtor

Ronald Daniel**X /s/ Shana King**

Signature of Joint Debtor

Shana King

Telephone Number (If not represented by attorney)

October 24, 2008

Date

Signature of Attorney***X /s/ Nicolette Robovsky**

Signature of Attorney for Debtor(s)

Nicolette Robovsky 6278336

Printed Name of Attorney for Debtor(s)

Gleason & Gleason

Firm Name

77 W Washington, Ste 1218

Address

Chicago, IL 60602**(312) 578-9530**

Telephone Number

October 24, 2008

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)

- I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A *bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.*

IN RE:

Daniel, Ronald

Debtor(s)

Case No. _____

Chapter 7 _____

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]*

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Ronald Daniel

Date: October 24, 2008

IN RE:

King, Shana

Debtor(s)

Case No. _____

Chapter 7 _____

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]*

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Shana King

Date: October 24, 2008

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Daniel, Ronald & King, Shana

Printed Name(s) of Debtor(s)

X /s/ Ronald Daniel

Signature of Debtor

10/24/2008

Date

Case No. (if known) _____

X /s/ Shana King

Signature of Joint Debtor (if any)

10/24/2008

Date

IN RE:

Case No. _____

Daniel, Ronald & King, Shana

Chapter 7 _____

Debtor(s)

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 293,000.00		
B - Personal Property	Yes	3	\$ 53,775.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 315,624.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	5		\$ 47,768.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 5,766.02
J - Current Expenditures of Individual Debtor(s)	Yes	2			\$ 5,760.00
TOTAL		18	\$ 346,775.00	\$ 363,392.00	

IN RE:

Case No. _____

Daniel, Ronald & King, Shana

Chapter 7 _____

Debtor(s)

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 4,705.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 4,705.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 5,766.02
Average Expenses (from Schedule J, Line 18)	\$ 5,760.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 7,599.11

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ 12,836.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ 0.00
4. Total from Schedule F	\$ 47,768.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ 60,604.00

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Residence at: 5820 Huron St Berkeley, IL 60163		J	293,000.00	287,788.00
			TOTAL	293,000.00

(Report also on Summary of Schedules)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash on hand	J	100.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	Checking Account w/ Charter One	J	100.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Checking Account w/ Chase	J	1,000.00
4. Household goods and furnishings, include audio, video, and computer equipment.		Normal and necessary household goods, including but not limited to : TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances, costume jewelry less than \$500 each piece	J	2,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X	Music, books, and pictures	J	75.00
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401K	H	5,000.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X				
16. Accounts receivable.	X				
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X				
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X				
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X				
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Personal Injury case: From minor car accident. Minor physical injuries. Some property damage. Attorney is Dennis Kellogg. Ph: (312) 782-6463.	J	30,000.00	
22. Patents, copyrights, and other intellectual property. Give particulars.	X				
23. Licenses, franchises, and other general intangibles. Give particulars.	X				
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X				
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2002 Pontiac Bonneville	J	5,000.00	
		2007 Nissan Altima	J	10,000.00	
26. Boats, motors, and accessories.	X				
27. Aircraft and accessories.	X				
28. Office equipment, furnishings, and supplies.	X				
29. Machinery, fixtures, equipment, and supplies used in business.	X				
30. Inventory.	X				
31. Animals.	X				

IN RE Daniel, Ronald & King, Shana

Debtor(s)

Case No.

(If known)

**SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)**

0 continuation sheets attached

(Include amounts from any continuation sheets attached.
Report total also on Summary of Schedules.)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:
(Check one box)

- 11 U.S.C. § 522(b)(2)
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<u>SCHEDULE A - REAL PROPERTY</u>			
Residence at: 5820 Huron St Berkeley, IL 60163	735 ILCS 5 §12-901	30,000.00	293,000.00
<u>SCHEDULE B - PERSONAL PROPERTY</u>			
Cash on hand	735 ILCS 5 §12-1001(b)	100.00	100.00
Checking Account w/ Charter One	735 ILCS 5 §12-1001(b)	100.00	100.00
Checking Account w/ Chase	735 ILCS 5 §12-1001(b)	1,000.00	1,000.00
Normal and necessary household goods, including but not limited to : TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances, costume jewelry less than \$500 each piece	735 ILCS 5 §12-1001(b)	2,500.00	2,500.00
Music, books, and pictures	735 ILCS 5 §12-1001(a)	75.00	75.00
401K	735 ILCS 5 §12-1006(a)	5,000.00	5,000.00
Personal Injury case: From minor car accident. Minor physical injuries. Some property damage. Attorney is Dennis Kellogg. Ph: (312) 782-6463.	735 ILCS 5 §12-1001(b) 735 ILCS 5 §12-1001(h)(4)	4,300.00 30,000.00	30,000.00
2002 Pontiac Bonneville	735 ILCS 5 §12-1001(c)	2,400.00	5,000.00
2007 Nissan Altima	735 ILCS 5 §12-1001(c)	2,400.00	10,000.00

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY
			CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO. 41171513546739 Beneficial/hfc Po Box 1547 Chesapeake, VA 23327	J	Revolving account opened 6/07. Second mortgage secured by Residence at: 5820 Huron St, Berkeley, IL 60163				17,777.00
		VALUE \$ 293,000.00				
ACCOUNT NO. 62062153555111001 Capital One Auto Finan 3901 Dallas Pkwy Plano, TX 75093	H	Installment account opened 6/07. Purchase money secured interest in 2002 Pontiac Bonneville.				14,247.00
		VALUE \$ 5,000.00				9,247.00
ACCOUNT NO. 00000025005991887 Nissan-infiniti Lt 2901 Kinwest Pkwy Irving, TX 75063	W	Installment account opened 9/07. Purchase money secured interest in 2007 Nissan Altima.				13,589.00
		VALUE \$ 10,000.00				3,589.00
ACCOUNT NO. 5157810469837 Us Bank Home Mortgage 4801 Frederica St Owensboro, KY 42301	J	1st Mortgage account opened 4/07. Secured by Residence at: 5820 Huron St, Berkeley, IL 60163				270,011.00
		VALUE \$ 293,000.00				

0 continuation sheets attached

Subtotal
(Total of this page) **\$ 315,624.00** **\$ 12,836.00**

Total
(Use only on last page) **\$ 315,624.00** **\$ 12,836.00**

(Report also on
Summary of
Schedules.)
(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 10071278050707557 American General Finan 3215 W 95th St Evergreen Park, IL 60805	H	Installment account opened 10/07				958.00
ACCOUNT NO. 4564190008517293 Aspire/cb And T Po Box 105555 Atlanta, GA 30348	W	Revolving account opened 11/05				1,817.00
ACCOUNT NO. 7084939214623 At&T Po Box 8100 Aurora, IL 60507	J	Utility or Cellular Service				59.00
ACCOUNT NO. Southwest Credit 5910 W Plano Pkwy, Ste 100 Plano, TX 75093-4638		Assignee or other notification for: At&T				
4 continuation sheets attached			Subtotal (Total of this page)	\$ 2,834.00		
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$		

IN RE Daniel, Ronald & King, Shana

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. 7899 Bank Of America Po Box 1598 Norfolk, VA 23501	W	Revolving account opened 2/06			481.00
ACCOUNT NO. 41171520545104 Beneficial/hfc Po Box 1547 Chesapeake, VA 23327		Revolving account opened 4/07			10,486.00
ACCOUNT NO. 486236259139 Cap One Po Box 85520 Richmond, VA 23285	W	Revolving account opened 7/03			5,776.00
ACCOUNT NO. 517805255202 Cap One Po Box 85520 Richmond, VA 23285		Revolving account opened 4/05			446.00
ACCOUNT NO. 514922638000 Chase 800 Brookside Blvd Westerville, OH 43081	W	Revolving account opened 4/04			493.00
ACCOUNT NO. 426684102778 Chase 800 Brookside Blvd Westerville, OH 43081		Revolving account opened 2/05			482.00
ACCOUNT NO. 152300347501 Chase/cc 225 Chastain Meadows Ct Kennesaw, GA 30144	H	Revolving account opened 9/01			1,294.00
Sheet no. 1 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 19,458.00	
			Total	\$	
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.	J	Utility or Cellular Use			310.00
Cingular Wireless/ AT&T Wireless 175 E Houston St San Antonio, TX 78205-2255					
ACCOUNT NO. 6011-3810-1503-0255	J	Revolving credit card charges incurred over the past several years.			350.00
Discover PO Box 5251 Carol Stream, IL 60197-5251					
ACCOUNT NO. 5370c569	W	Installment account opened 3/08			943.00
Dvra Billing 2701 Loker Av West Carlsbad, CA 92008					
ACCOUNT NO. 603220338134	W	Revolving account opened 1/02			960.00
Gemb/walmart Po Box 981400 El Paso, TX 79998					
ACCOUNT NO. 10045958	H	Installment account opened 10/07			1,138.00
Great American Finance 1801 S. Meyers Rd Oakbrook Terra, IL 60181					
ACCOUNT NO. 5407915026539491	H	Revolving account opened 4/07			303.00
Hsbc Bank Po Box 5253 Carol Stream, IL 60197					
ACCOUNT NO. 5480420029679501	W	Revolving account opened 11/06			516.00
Hsbc Bank Po Box 5253 Carol Stream, IL 60197					
Sheet no. <u>2</u> of <u>4</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 4,520.00	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 5440455022034584 Hsbc Bank Po Box 5253 Carol Stream, IL 60197	H	Revolving account opened 8/04			471.00
ACCOUNT NO. 546702000627 Hsbc Bank Po Box 5253 Carol Stream, IL 60197	W	Revolving account opened 3/02			5,772.00
ACCOUNT NO. 700109900264 Hsbc/bsbuy Po Box 15519 Wilmington, DE 19850	H	Revolving account opened 9/96			4,488.00
ACCOUNT NO. 1127373661 Nbgl-carsons Po Box 15521 Wilmington, DE 19805	W	Revolving account opened 12/01			100.00
ACCOUNT NO. 1215 Nicor Gas 1844 Ferry Road Naperville, IL 60563	W	Open account opened 10/06			955.00
ACCOUNT NO. 22045 Nordstrom Fsb Po Box 6555 Englewood, CO 80155	W	Revolving account opened 9/06			458.00
ACCOUNT NO. 909081568810001 Sallie Mae Servicing 1002 Arthur Dr Lynn Haven, FL 32444	H	Installment account opened 1/00			4,705.00
Sheet no. 3 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 16,949.00	
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			Total	\$	
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 504994137300 Sears/cbsd Po Box 6189 Sioux Falls, SD 57117	W	Revolving account opened 9/06			639.00
ACCOUNT NO. 424163683 Tnb - Target Po Box 673 Minneapolis, MN 55440		Revolving account opened 7/07			482.00
ACCOUNT NO. 5856370690078754 Wfnbb/harlem Furniture Po Box 182273 - Wf Columbus, OH 43218	W	Revolving account opened 1/07			2,886.00
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
Sheet no. 4 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 4,007.00	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$ 47,768.00	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): Dependent	AGE(S): 6 mos
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation Customer Service	See Schedule Attached	
Name of Employer Car Max		
How long employed 6 years		
Address of Employer Hillside, IL		

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	DEBTOR	SPOUSE
\$ 5,133.68	\$ 2,465.43	
\$	\$	

3. SUBTOTAL

4. LESS PAYROLL DEDUCTIONS	\$ 5,133.68	\$ 2,465.43
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a. Payroll taxes and Social Security	\$ 980.48	\$ 317.88
b. Insurance	\$ 511.71	\$
c. Union dues	\$	\$
d. Other (specify) Union Due	\$	\$ 23.02
	\$	\$

5. SUBTOTAL OF PAYROLL DEDUCTIONS

6. TOTAL NET MONTHLY TAKE HOME PAY	\$ 1,492.19	\$ 340.90
---	--------------------	------------------

\$ 3,641.49	\$ 2,124.53
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7. Regular income from operation of business or profession or farm (attach detailed statement)	\$	\$
8. Income from real property	\$	\$
9. Interest and dividends	\$	\$
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$	\$
11. Social Security or other government assistance (Specify) _____	\$	\$
	\$	\$
12. Pension or retirement income	\$	\$
13. Other monthly income (Specify) _____	\$	\$
	\$	\$
	\$	\$

14. SUBTOTAL OF LINES 7 THROUGH 13

15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ 3,641.49	\$ 2,124.53
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16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)

\$ 5,766.02

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
None

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)
Continuation Sheet - Page 1 of 1**EMPLOYMENT:** DEBTOR**SPOUSE****Caregiver****Aspire**Occupation
Name of Employer
How long employed
Address of Employer**Westchester, IL**Occupation
Name of Employer
How long employed
Address of Employer**Cashier**
Home Depot**Oak Brook Terrace, IL**

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) \$ **2,409.00**

- a. Are real estate taxes included? Yes No _____
- b. Is property insurance included? Yes No _____

2. Utilities:

- a. Electricity and heating fuel \$ **280.00**
- b. Water and sewer \$ **65.00**
- c. Telephone \$ **50.00**
- d. Other **Cell Phone** \$ **110.00**
- Cable And Internet** \$ **180.00**

3. Home maintenance (repairs and upkeep) \$ **50.00**

4. Food \$ **450.00**

5. Clothing \$ **120.00**

6. Laundry and dry cleaning \$ **60.00**

7. Medical and dental expenses \$ **150.00**

8. Transportation (not including car payments) \$ **300.00**

9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ **50.00**

10. Charitable contributions \$ _____

11. Insurance (not deducted from wages or included in home mortgage payments)

- a. Homeowner's or renter's \$ _____
- b. Life \$ _____
- c. Health \$ _____
- d. Auto \$ **160.00**
- e. Other \$ _____

12. Taxes (not deducted from wages or included in home mortgage payments)
(Specify) \$ _____

13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)

- a. Auto \$ **411.00**
- b. Other **Second Mortgage** \$ **260.00**

14. Alimony, maintenance, and support paid to others \$ _____

15. Payments for support of additional dependents not living at your home \$ _____

16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ _____

17. Other **See Schedule Attached** \$ **655.00**

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ **5,760.00**

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

None

20. STATEMENT OF MONTHLY NET INCOME

- a. Average monthly income from Line 15 of Schedule I \$ **5,766.02**
- b. Average monthly expenses from Line 18 above \$ **5,760.00**
- c. Monthly net income (a. minus b.) \$ **6.02**

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)
Continuation Sheet - Page 1 of 1

Other Expenses (DEBTOR)

Child Care	500.00
Vehicle Care And Maintenance	35.00
Bank Fee And Postage	20.00
Personal Care & Grooming	100.00

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 20 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: October 24, 2008

Signature: /s/ Ronald Daniel
Ronald Daniel

Debtor

Date: October 24, 2008

Signature: /s/ Shana King
Shana King

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

IN RE:

Case No. _____

Daniel, Ronald & King, Shana

Chapter 7 _____

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
62,027.00	2006 income from employment (husband)
60,822.00	2007 income from employment (husband)
4,700.00	2008 income from employment (monthly) (husband)
35,295.00	2006 income from employment (wife)
12,499.00	2007 income from employment (wife)
2,500.00	2008 income from employment (monthly) (wife)

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
9,022.00	2007 income from Unemployment (wife)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

- None *a. Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
US Bank Home Mortgage PO Box 5229 Cincinnati, OH 45201-5229	Last 3 months	7,218.00	270,011.00
Beneficial/ HFC 961 Weigel Ave Elmhurst, IL 60126-1058	Last 3 months	825.00	17,777.00
Capital One Auto Finance 3901 N Dallas Pkwy Plano, TX 75093-7864	Last 3 months	912.00	14,247.00
Nissan- Infiniti 2901 Kinwest Pkwy Irving, TX 75063-3134	Last 3 months	1,233.00	13,589.00

- None *b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

- None *c. All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

- None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Ron Daniel and Shana King vs Grange Mutual	Personal Injury/ Property Damage	Circuit Court of Cook County	Pending

- None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

- None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

- None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

- None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

- None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

- None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

- None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

10. Other transfers

- None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

- None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

- None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

- None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

- None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

- None List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

- None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

- None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

- Note** a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

Note b. Identify any business listed in response to subdivision a., above, that is “single asset real estate” as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: October 24, 2008

Signature /s/ Ronald Daniel
of Debtor

Ronald Daniel

Date: October 24, 2008

Signature /s/ Shana King
of Joint Debtor
(if any)

Shana King

0 continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

IN RE:

Daniel, Ronald & King, Shana

Debtor(s)

Case No. _____

Chapter 7 _____

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

- I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.
 I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
 I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
Residence at: 2002 Pontiac Bonneville	Beneficial/hfc				✓
2007 Nissan Altima	Capital One Auto Finan		✓		
Residence at:	Nissan-infiniti Lt				✓
	Us Bank Home Mortgage				✓

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)

10/24/2008 /s/ Ronald Daniel /s/ Shana King
Date Debtor Shana King Joint Debtor (if applicable)

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

IN RE:

Daniel, Ronald & King, Shana

Debtor(s)

Case No. _____

Chapter 7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors 26

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: October 24, 2008

/s/ Ronald Daniel

Debtor

/s/ Shana King

Joint Debtor

Daniel, Ronald
5820 Huron St
Berkeley, IL 60163

Chase
800 Brookside Blvd
Westerville, OH 43081

Nicor Gas
1844 Ferry Road
Naperville, IL 60563

King, Shana
5820 Huron St
Berkeley, IL 60163

Chase/cc
225 Chastain Meadows Ct
Kennesaw, GA 30144

Nissan-infiniti Lt
2901 Kinwest Pkwy
Irving, TX 75063

Gleason & Gleason
77 W Washington, Ste 1218
Chicago, IL 60602

Cingular Wireless/ AT&T Wireless
175 E Houston St
San Antonio, TX 78205-2255

Nordstrom Fsb
Po Box 6555
Englewood, CO 80155

American General Finan
3215 W 95th St
Evergreen Park, IL 60805

Discover
PO Box 5251
Carol Stream, IL 60197-5251

Sallie Mae Servicing
1002 Arthur Dr
Lynn Haven, FL 32444

Aspire/cb And T
Po Box 105555
Atlanta, GA 30348

Dvra Billing
2701 Loker Av West
Carlsbad, CA 92008

Sears/cbsd
Po Box 6189
Sioux Falls, SD 57117

At&T
Po Box 8100
Aurora, IL 60507

Gemb/walmart
Po Box 981400
El Paso, TX 79998

Southwest Credit
5910 W Plano Pkwy, Ste 100
Plano, TX 75093-4638

Bank Of America
Po Box 1598
Norfolk, VA 23501

Great American Finance
1801 S. Meyers Rd
Oakbrook Terra, IL 60181

Tnb - Target
Po Box 673
Minneapolis, MN 55440

Beneficial/hfc
Po Box 1547
Chesapeake, VA 23327

Hsbc Bank
Po Box 5253
Carol Stream, IL 60197

Us Bank Home Mortgage
4801 Frederica St
Owensboro, KY 42301

Cap One
Po Box 85520
Richmond, VA 23285

Hsbc/bsbuy
Po Box 15519
Wilmington, DE 19850

Wfnbb/harlem Furniture
Po Box 182273 - Wf
Columbus, OH 43218

Capital One Auto Finan
3901 Dallas Pkwy
Plano, TX 75093

Nbgl-carsons
Po Box 15521
Wilmington, DE 19805

IN RE:

Daniel, Ronald & King, Shana

Debtor(s)

Case No. _____

Chapter 7 _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	676.00
Prior to the filing of this statement I have received	\$	351.00
Balance Due	\$	325.00

2. The source of the compensation paid to me was: Debtor Other (specify): _____
3. The source of compensation to be paid to me is: Debtor Other (specify): _____
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
 - [Other provisions as needed]
6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 24, 2008

Date

/s/ Nicolette Robovsky

Signature of Attorney

Gleason & Gleason

Name of Law Firm

Form 1040 U.S. Individual Income Tax Return 2007 (99) IRS Use Only-Do not write or staple in this space.

Label	For the year Jan. 1-Dec. 31, 2007, or other tax year beginning	.2007, ending	.20	OMB No. 1545-0074
(See instructions)	Name Spouse's Name (if Joint Return)	Home Address	City, State, and ZIP Code	Your social security number 207-74-3340
Use the IRS label. Otherwise, please print or type	SHANA H KING	Spouse's social security no.		
	R 5820 HURON Berkeley IL 60163	You must enter ▲ your SSN(s) above ▲ Checking a box below will not change your tax or refund.		

Presidential Election Campaign ► Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see instructions) ►		<input type="checkbox"/> You	<input type="checkbox"/> Spouse
Filing Status	1 <input type="checkbox"/> Single	4 <input checked="" type="checkbox"/> Head of household (with qualifying person). (See instructions.)	If the qualifying person is a child but not your dependent, enter this child's name here. ►
Check only one box.	2 <input type="checkbox"/> Married filing jointly (even if only one had income)	5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see instructions)	
	3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ►		
Exemptions	6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a	Boxes checked on	
If more than four dependents, see instr.	b <input type="checkbox"/> Spouse	6a and 6b	1
	c Dependents:	(2) Dependent's social security no.	(3) Dependent's relationship to you
(1) First name Last name	JORDYN DANIEL	357-06-9148	(4) If qualifying child for child tax credit (see inst.) <input checked="" type="checkbox"/>
			• lived with you
			• did not live with you due to divorce or separation (see inst.)
			Dependents on 6c not entered above
d Total number of exemptions claimed		Add numbers on lines above ►	2

Income	7 Wages, salaries, tips, etc. Attach Form(s) W-2	7 12,499.
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	8a Taxable interest. Attach Schedule B if required	8a
If you did not get a W-2, see instructions.	b Tax-exempt interest. Do not include on line 8a	8b
Enclose, but do not attach, any payment. Also, please use Form 1040-V.	9a Ordinary dividends. Attach Schedule B if required	9a
	b Qualified dividends (see instructions)	9b
	10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10
	11 Alimony received	11
	12 Business income or (loss). Attach Schedule C or C-EZ	12
	13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ►	13
	14 Other gains or (losses). Attach Form 4797	14
	15a IRA distributions	15a
	b Taxable amount (see inst.)	15b
	16a Pensions and annuities	16a
	b Taxable amount (see inst.)	16b 838.
	17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17
	18 Farm income or (loss). Attach Schedule F	18
	19 Unemployment compensation	19 9,022.
	20a Social security benefits	20a
	b Taxable amount (see inst.)	20b
	21 Other income. List type and amount (see instr.)	21
	22 Add the amounts in the far right column for lines 7 through 21. This is your total income ►	22 22,359.
Adjusted Gross Income	23 Educator expenses (see instructions)	23
	24 Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ	24
	25 Health savings account deduction. Attach Form 8889	25
	26 Moving expenses. Attach Form 3903	26
	27 One-half of self-employment tax. Attach Schedule SE	27
	28 Self-employed SEP, SIMPLE, and qualified plans	28
	29 Self-employed health insurance deduction (see instr.)	29
	30 Penalty on early withdrawal of savings	30
	31a Alimony paid b Recipient's SSN ►	31a
	32 IRA deduction (see instructions)	32
	33 Student loan interest deduction (see instructions)	33
	34 Tuition and fees deduction. Attach Form 8917	34
	35 Domestic production activities deduction. Attach Form 8903	35
	36 Add lines 23 through 31a and 32 through 35	36
	37 Subtract line 36 from line 22. This is your adjusted gross income ►	37 22,359.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.

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US1040\$1 Rev. 1

Form 1040 (2007)

Form 1040 (2007)

SHANA H KING

327-74-3340

Page 2

Tax and Credits

Standard Deduction for -

- People who checked any box on line 39a or 39b or who can be claimed as a dependent, see instr.
- All others: Single or Married filing separately, \$5,350

Married filing jointly or Qualifying widow(er), \$10,700

Head of household, \$7,850

38	Amount from line 37 (adjusted gross income)	38	22,359.
39a	Check <input type="checkbox"/> You were born before Jan. 2, 1943, <input type="checkbox"/> Blind. Total boxes <input type="checkbox"/> if: Spouse was born before Jan. 2, 1943, <input type="checkbox"/> Blind. checked ► 39a	38	
b	If your spouse itemizes on a separate return or you were a dual-status alien, see instructions and check here ► 39b <input type="checkbox"/>	40	7,850.
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	41	14,509.
41	Subtract line 40 from line 38	42	6,800.
42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line 6d. If line 38 is over \$117,300, see the worksheet in the instructions	43	7,709.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	44	773.
44	Tax (see instr.). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> Form(s) 8889	45	
45	Alternative minimum tax (see instructions). Attach Form 6251	46	773.
46	Add lines 44 and 45	47	
47	Credit for child and dependent care exp. Attach Form 2441	48	
48	Credit for the elderly or the disabled. Attach Schedule R	49	
49	Education credits. Attach Form 8863	50	
50	Residential energy credits. Attach Form 5695	51	
51	Foreign tax credit. Attach Form 1116 if required	52	773.
52	Child tax credit (see inst.). Attach Form 8901 if required	53	
53	Retirement savings contributions credit. Attach Form 8880	54	
54	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859 c <input type="checkbox"/> Form 8839	55	
55	Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	56	773.
56	Add lines 47 through 55. These are your total credits	57	
57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	58	
58	Self-employment tax. Attach Schedule SE	59	
59	Unreported social security and Medicare tax from: a <input type="checkbox"/> Form 4137 b <input type="checkbox"/> Form 8919	60	84.
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required NO	61	
61	Advance earned income credit payments from Form(s) W-2, box 9	62	
62	Household employment taxes. Attach Schedule H	63	84.
63	Add lines 57 through 62. This is your total tax		
64	Federal income tax withheld from Forms W-2 and 1099	64	1,939.
65	2007 estimated tax pymts and amt applied from 2006 return	65	
66a	Earned income credit (EIC)	66a	1,736.
b	Nonlaxable combat pay election ► 66b <input type="checkbox"/>		
67	Excess social security and tier 1 RRTA tax withheld (see inst)	68	
68	Additional child tax credit. Attach Form 8812	69	
69	Amount paid with request for extension to file (see inst)	70	
70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	71	
71	Refundable credit for prior year minimum tax from Form 8801, line 27	72	3,787.
72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	73	3,703.
73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid	74a	3,703.
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here ► <input type="checkbox"/> b Routing number BANK PRODUCT ► c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings d Account number APPLIED FOR		
75	Amount of line 73 you want applied to your 2008 estimated tax ► 75	76	
76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see instructions ► 76		
77	Estimated tax penalty (see instructions)	77	

Refund

Direct deposit?
See instructions and fill in 74b, 74c, and 74d, or Form 8888.



Form 1040 U.S. Individual Income Tax Return 2007 (99) IRS Use Only-Do not write or staple in this space.

Label	For the year Jan. 1-Dec. 31, 2007, or other tax year beginning <input type="text"/> ,2007, ending <input type="text"/> .20			OMB No. 1545-0074
(See instructions)	Name <input type="text"/> Spouse's Name (if Joint Return) <input type="text"/>	Home Address <input type="text"/>	City, State, and ZIP Code <input type="text"/>	Your social security number <input type="text"/> 351-70-9708
Use the IRS label. Otherwise, please print or type.	RONALD DANIEL	Spouse's social security no. <input type="text"/>		
E	H	You must enter ▲ your SSN(s) above. ▲ Checking a box below will not change your tax or refund.		
E	R	5820 HURON ST Berkeley IL 60163		

Presidential

Election Campaign ► Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see instructions) ► You Spouse

Filing Status 1 Single 4 Head of household (with qualifying person). (See instructions.)
 2 Married filing jointly (even if only one had income)
 3 Married filing separately. Enter spouse's SSN above
 and full name here.► 5 Qualifying widow(er) with dependent child (see instructions)

Exemptions 6a Yourself. If someone can claim you as a dependent, do not check box 6a
 b Spouse
 c Dependents:

(1) First name <input type="text"/>	Last name <input type="text"/>	(2) Dependent's social security no. <input type="text"/>	(3) Dependent's relationship to you <input type="text"/>	(4) <input type="checkbox"/> If qualifying child for child tax credit (see inst.)
-------------------------------------	--------------------------------	--	--	---

 If more than four dependents, see instr. d Total number of exemptions claimed
 Boxes checked on 6a and 6b
 No. of children on 6c who:
 - lived with you 0
 - did not live with you due to divorce or separation (see instr.) 0
 Dependents on 6c not entered above 0
 Add numbers on lines above ► 1

Income
 Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.
 If you did not get a W-2, see instructions.
 Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2 <input type="text"/>	7 60,822.
8a Taxable interest. Attach Schedule B if required <input type="text"/>	8a
b Tax-exempt interest. Do not include on line 8a <input type="text"/> 8b	
9a Ordinary dividends. Attach Schedule B if required <input type="text"/>	9a
b Qualified dividends (see instructions) <input type="text"/> 9b	
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) <input type="text"/> 10	
11 Alimony received <input type="text"/> 11	
12 Business income or (loss). Attach Schedule C or C-EZ <input type="text"/> 12	
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ► <input type="checkbox"/> 13 1.	
14 Other gains or (losses). Attach Form 4797 <input type="text"/> 14	
15a IRA distributions <input type="text"/> 15a b Taxable amount (see inst.) <input type="text"/> 15b	
16a Pensions and annuities <input type="text"/> 16a b Taxable amount (see inst.) <input type="text"/> 16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E <input type="text"/> 17	
18 Farm income or (loss). Attach Schedule F <input type="text"/> 18	
19 Unemployment compensation <input type="text"/> 19	
20a Social security benefits <input type="text"/> 20a b Taxable amount (see inst.) <input type="text"/> 20b	
21 Other income. List type and amount (see instr.) <input type="text"/> 21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income ► <input type="text"/> 22 60,823.	

Adjusted Gross Income
 23 Educator expenses (see instructions) 23
 24 Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ 24
 25 Health savings account deduction. Attach Form 8889 25
 26 Moving expenses. Attach Form 3903 26
 27 One-half of self-employment tax. Attach Schedule SE 27
 28 Self-employed SEP, SIMPLE, and qualified plans 28
 29 Self-employed health insurance deduction (see instr.) 29
 30 Penalty on early withdrawal of savings 30
 31a Alimony paid b Recipient's SSN ► 31a
 32 IRA deduction (see instructions) 32
 33 Student loan interest deduction (see instructions) 33
 34 Tuition and fees deduction. Attach Form 8917 34
 35 Domestic production activities deduction. Attach Form 8903. 35
 36 Add lines 23 through 31a and 32 through 35 36
 37 Subtract line 36 from line 22. This is your adjusted gross income ► 37 60,823.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.

Form 1040 (2007)

Form 1040 (2007)

RONALD DANIEL

351-70-9708

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Tax and Credits

Standard Deduction for -

- People who checked any box on line 39a or 39b or who can be claimed as a dependent, see instr.
- All others: Single or Married filing separately, \$5,350

Married filing jointly or Qualifying widow(er), \$10,700

Head of household, \$7,850

38	Amount from line 37 (adjusted gross income)	38	60,823.
39a	Check <input type="checkbox"/> You were born before Jan. 2, 1943, <input type="checkbox"/> Blind. Total boxes <input type="checkbox"/> if: Spouse was born before Jan. 2, 1943, <input type="checkbox"/> Blind. checked ► 39a		
b	If your spouse itemizes on a separate return or you were a dual-status alien, see instructions and check here	39b	<input type="checkbox"/>
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	29,932.
41	Subtract line 40 from line 38	41	30,891.
42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line 6d. If line 38 is over \$117,300, see the worksheet in the instructions	42	3,400.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	27,491.
44	Tax (see instr.). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> Form(s) 8889	44	3,730.
45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Add lines 44 and 45	46	3,730.
47	Credit for child and dependent care exp. Attach Form 2441..	47	
48	Credit for the elderly or the disabled. Attach Schedule R	48	
49	Education credits. Attach Form 8863	49	
50	Residential energy credits. Attach Form 5695	50	
51	Foreign tax credit. Attach Form 1116 if required	51	
52	Child tax credit (see inst.). Attach Form 8901 if required	52	
53	Retirement savings contributions credit. Attach Form 8880	53	
54	Credits from: a <input type="checkbox"/> Form 8395 b <input type="checkbox"/> Form 8859 c <input type="checkbox"/> Form 8839	54	
55	Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	55	
56	Add lines 47 through 55. These are your total credits	56	
57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0- ►	57	3,730.
58	Self-employment tax. Attach Schedule SE	58	
59	Unreported social security and Medicare tax from: a <input type="checkbox"/> Form 4137 b <input type="checkbox"/> Form 8919	59	
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	
61	Advance earned income credit payments from Form(s) W-2, box 9	61	
62	Household employment taxes. Attach Schedule H	62	
63	Add lines 57 through 62. This is your total tax	63	3,730.
64	Federal income tax withheld from Forms W-2 and 1099	64	8,562.
65	2007 estimated tax pymts and amt applied from 2006 return	65	
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election	66b	
67	Excess social security and tier 1 RRTA tax withheld (see inst)	67	
68	Additional child tax credit. Attach Form 8812	68	
69	Amount paid with request for extension to file (see inst)	69	
70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	70	
71	Refundable credit for prior year minimum tax from Form 8801, line 27	71	
72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	8,562.
73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid	73	4,832.
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here ► <input type="checkbox"/> b Routing number BANK PRODUCT ► c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings d Account number APPLIED FOR	74a	4,832.
75	Amount of line 73 you want applied to your 2008 estimated tax ►	75	
76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see instructions ►	76	
77	Estimated tax penalty (see instructions)	77	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following.
Designee's name ► **ANOINTING ONE TAX SERVICE** Personal identification number (PIN) ► **00001**

Sign Here

Joint return? See instr.
Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

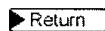
Your signature Date Your occupation Daytime phone number
SENIOR SERVICE CONSULT 773-851-5881

Spouse's signature. If a joint return, both must sign. Date Spouse's occupation

Preparer's signature ►	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN P00001492
Firm's name (or yours if self-employed), address, and ZIP code ► ANOINTING ONE TAX SERVICE 745 GARFIELD Oak Park IL 60304~	EIN 03-0596078	Phone no. 708-660-9870	

Berkeley IL
60163-
0000

To **Return** to the Pay Stub Summary Page, click the "Return" button.



ASSOCIATE NAME:	JOAN M COOPER
TAX STATUS:	EXEMPT
FICA-MED	O
FICA-QASDI	O
FED INC TX	M 2
IL STATE	S 2

ASSOCIATE ID:	126607076
PAY PERIOD BEGIN:	05/01/2008
PAY PERIOD END:	05/11/2008
ADVICE DATE:	05/16/2008
ADVICE NUMBER:	1633703

EARNINGS				DEDUCTIONS			TAXES			
DESCRIPTION	RATE	HOURS	CURRENT	YEAR-TO-DATE	DESCRIPTION	CURRENT	YEAR-TO-DATE	DESCRIPTION	CURRENT	YEAR-TO-DATE
REGULAR	9.50	39.00	370.50	2,546.00	CHECKING	589.99	1,217.67	FICA-MED	9.64	41.94
REGULAR	9.50	27.50	261.25	2,807.25				FICA-QASDI	41.23	179.35
REG ADJUST	9.50	3.50	33.25	85.50				FED INC TX	8.81	56.51
								IL STATE	15.33	68.32
GROSS PAY:				665.00	2,892.75			NET PAY:		.00
HOME DEPOT U.S.A. INC.										1,326.96

ASSOCIATE NAME: SHANA H KING

TAX STATUS:	EXEMPT
FICA-MED	O
FICA-QASDI	O
FED INC TX	M 2
IL STATE	S 2

ASSOCIATE ID:	126607076
PIN NO:	9507
PAY PERIOD BEGIN:	05/12/2008
ADVICE DATE:	05/30/2008
PAY PERIOD END:	05/25/2008
ADVICE NUMBER:	1811725

EARNINGS				DEDUCTIONS			TAXES			
DESCRIPTION	RATE	HOURS	CURRENT	YEAR-TO-DATE	DESCRIPTION	CURRENT	YEAR-TO-DATE	DESCRIPTION	CURRENT	YEAR-TO-DATE
REGULAR	9.50	32.00	304.00	3,111.25	CHECKING	599.40	1,817.07	FICA-MED	9.82	51.76
REGULAR	9.50	35.00	332.50	3,443.75				FICA-QASDI	41.97	221.32
REG ADJUST	9.50	4.25	40.38	125.88				FED INC TX	10.00	68.51
								IL STATE	15.69	84.01
GROSS PAY:				676.88	3,569.63			NET PAY:		.00
HOME DEPOT U.S.A. INC.										1,326.96

ASSOCIATE NAME: SHANA H KING

TAX STATUS:	EXEMPT
FICA-MED	O
FICA-QASDI	O
FED INC TX	M 2
IL STATE	S 2

ASSOCIATE ID:	126607076
PIN NO:	9507
PAY PERIOD BEGIN:	04/14/2008
ADVICE DATE:	05/02/2008
PAY PERIOD END:	04/27/2008
ADVICE NUMBER:	1461792

HR OR PAY QUESTIONS? 1-866-MYTHDHR OR MYTHDHR@HOMEDEPOT.COM

EARNINGS				DEDUCTIONS			TAXES			
DESCRIPTION	RATE	HOURS	CURRENT	YEAR-TO-DATE	DESCRIPTION	CURRENT	YEAR-TO-DATE	DESCRIPTION	CURRENT	YEAR-TO-DATE
REGULAR	9.50	35.50	337.25	1,800.25	CHECKING	627.68	627.68	FICA-MED	10.33	32.30
REGULAR	9.50	39.50	375.25	2,175.50				FICA-QASDI	44.17	138.12
REG ADJUST	.00	.00	.00	52.25				FED INC TX	13.56	49.70
								IL STATE	16.76	52.99
GROSS PAY:				712.50	2,227.75			NET PAY:		.00
HOME DEPOT U.S.A. INC.										1,326.96

ASPIRE

4365 333 King, S. H. 05/08/2008

EMPLOYEE NO.

DEPARTMENT

EMPLOYEE NAME

SOCIAL SECURITY NO.

PERIOD END

CHECK NO.

EARNINGS	HRS/JUNTS	CURRENT AMOUNT	YEAR TO DATE	DEDUCTIONS	CURRENT AMOUNT	YEAR TO DATE
Regular Pay Shift Differ!	26.000 0.000	242.58 7.80	3396.67 114.24	FEDERAL MEDICAR FEDERAL SOCIAL ILLINOIS AFSCME Dues 486	3.63 15.52 5.01 11.51	54.41 232.60 90.06 103.27

PAY RATE	CURRENT EARNINGS	CURRENT DEDUCTIONS	NET PAY	Y.T.D. EARNINGS	Y.T.D. DEDUCTIONS	Y.T.D. NET PAY
9.33	250.38	35.67	214.71	3751.89	645.40	3106.49

For the planets sake, Aspire 2 B Green in all you do.

Vacation Balance: 0.00

Illness Balance: 2.76

Personal Balance: 0.00

WLC/KBT/TP PICTURE PERFECT FORMS • 847-488-4303

Total Points: 30.00

0-51 acceptable

62 - written warning

68 - suspension

74 - termination of employment

ASPIRE

4365 EMPLOYEE NO.		333 DEPARTMENT		King, S. H. EMPLOYEE NAME		06/23/2008 PERIOD END		CHECK NO.		
EARNINGS		HRS./UNITS		CURRENT AMOUNT		YEAR TO DATE		DEDUCTIONS		
Regular Pay Shift Differ!		36.000 0.000		335.88 10.80		4684.21 155.64		FEDERAL INCOME FEDERAL MEDICAR FEDERAL SOCIAL ILLINOIS AFSCME Dues 486	9.04 5.03 21.49 7.90 11.51	224.81 74.23 317.31 123.55 137.80

PAY RATE	9.33	CURRENT EARNINGS	346.68	CURRENT DEDUCTIONS	54.97	NET PAY	291.71	Y.T.D. EARNINGS	5118.15	Y.T.D. DEDUCTIONS	877.70	Y.T.D. NET PAY	4240.45
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Get on the bandwagon! Recycle it's all the rage.

Vacation Balance: 0.00

Illness Balance: 2.76

Personal Balance: 0.00

WICKES11TP
PICTURE PERFECT FORMS • 847-688-8303

Total Points: 34.00

0-61 acceptable

62 - written warning

68 - suspension

74 - termination of employment

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ASPIRE

EMPLOYEE NO.		DEPARTMENT		EMPLOYEE NAME		SOCIAL SECURITY NO.		07/08/2008 PERIOD END		CHECK NO.	
EARNINGS		HRS/JUNTS	CURRENT AMOUNT	YEAR TO DATE		DEDUCTIONS		CURRENT AMOUNT	YEAR TO DATE		
Regular Pay	8.000		74.64	4758.85	FEDERAL MEDICAR	1.12	75.35				
Shift Differ'l	0.000		2.40	158.04	FEDERAL SOCIAL	4.78	322.09				
					AFSCME Dues 486	11.51	149.31				
PAY RATE	9.33	CURRENT EARNINGS	77.04	CURRENT DEDUCTIONS	17.41	NET PAY	59.63	Y.T.D. EARNINGS	5195.19	Y.T.D. DEDUCTIONS	895.11
											4300.08 Y.T.D. NET PAY

Get on the bandwagon! Recycle it's all the rage.

Vacation Balance: 4.00

Illness Balance: 2.76

Personal Balance: 0.00
PICTURE PERFECT FORMS • 847-588-8303
WICKES11TP

Total Points: 37.00

0-51 acceptable
62 - written warning
68 - suspension

74 - termination of employment
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CO FILE # 006517-004952
 CWM 000057067
 Location DeptId EmpID
 07146 070050 115499
 CarMax Auto Superstores Inc.
 12800 Tuckahoe Creek Pkwy
 Richmond, VA 23238

Marital Status: Married

Exemptions/Allowances

Federal: 2
 State(IL): 2
 Local: 0

Ronald Daniel
 5820 Huron St
 Berkeley, IL 60163-0000

Pay Period:
 05/18/2008 to 05/31/2008
 Advice Date:
 06/06/2008
 Advice Number:
 0000996445
 Batch Number:
 BL810001

Earnings Statement

Page 001 of 002

05/18/2008 to 05/31/2008

06/06/2008

0000996445

BL810001

Earnings	Rate	Hours	This Period	Year-to-Date
Reg. Earn	8.650	81.75	707.14	
Bonus Misc			538.60	
MED REIMB			223.12	
OT SERV/C			128.79	
Sick Pay	8.650	8.00	69.20	
SPIFF Comm			713.25	
Holiday	32.600	8.00	260.80	
Gross Pay			2640.90	33577.50

[Emp]id: 115499

Leave Accrual Balances

Leave Type	Carryover	Earned	Taken	Left
Sick	0.00	20.00	24.00	-4.00
Vacation	0.00	20.01	0.00	20.01
Personal	0.00	13.35	0.00	13.35
Holiday				

Important Notes

Deductions	Statutory	
Federal Withholding Tax	-298.65	-4147.50
Social Security Tax	-149.31	-1934.59
Medicare Tax	-34.92	-452.44
IL Withholding Tax	-67.63	-867.58
Total Tax Deductions:	-556.51	-7702.11

Taxable Wage Base

Federal Withholding Tax	
Social Security Tax	2408.22
Medicare Tax	2408.22
IL Withholding Tax	2408.22
	30380.74

Deductions Other

401K Loan	-48.73
LTD	-3.50
*Medical	-39.60
*Dental	-194.12
*Vision	-29.00
DP DTL	-30.60
DP Med	-9.56
	-98.82
	0.00
	-40.50
	-308.10

CARMAX

CO FILE # 006247-004897
 CMM 000057057
 Location DeptId EmpID
 07146 070050 115499
 CarMax Auto Superstores Inc.
 12800 Tuckahoe Creek Pkwy
 Richmond, VA 23238

Marital Status: Married

Exemptions/Allowances
 Federal: 2
 State(1): 2
 Local: 0

BN850001

Ronald Daniel
 5820 Huron St
 Berkeley, IL 60163-0000

Earnings Statement

Page 001 of 002
 06/15/2008 to 06/28/2008

Pay Period:
 Advice Date:
 Advice Number:
 Batch Number:

BN850001

Employee: 115499
 Ronald Daniel
 5820 Huron St
 Berkeley, IL 60163-0000

Earnings	Rate	Hours	This Period	Year-to-Date
Reg Farm	8.650	81.50	704.98	
Bonus Misc			541.00	
MED REIMB			223.12	
OTServC			169.61	
SPIFF Comm	13.75		764.25	
Personal	31.640	16.00	505.24	
Gross Pay			2969.28	38983.34
Deductions	Statutory			
Federal Withholding Tax		-339.14	-4762.50	
Social Security Tax		-165.95	-2241.83	
Medicare Tax		-38.81	-524.30	
IL Withholding Tax		-75.68	-1007.02	
Total Tax Deductions:		-639.58	-8335.65	
Taxable Wage Base				
Federal Withholding Tax		2576.52	35336.22	
Social Security Tax		2676.52	36158.47	
Medicare Tax		2676.52	36158.47	
IL Withholding Tax		2676.52	35336.22	
Deductions	Other			
401K Loan		-48.73	-682.22	
LTD		-3.50	-46.60	
*Medical		-194.12	-2363.33	
*Dental		-29.00	-358.60	
*Vision		-9.56	-117.94	
DP DTL		0.00	-40.50	
DP Med		0.00	-308.10	
DP Vision		0.00	-15.90	

Leave Type	Carryover	Earned	Taken	Left
Sick	0.00	24.00	24.00	0.00
Vacation	0.00	26.68	0.00	26.68
Personal	0.00	16.02	16.00	0.02

Important Notes



C0 FILE # 006660-004922
 CM# 00057067
 Location Dept# EmpID
 07146 070050 115499
 CarMax Auto Superstores Inc.
 12800 Tuckahoe Creek Pkwy
 Richmond, VA 23238

Marital Status: Married

Exemptions/Allowances
 Federal: 2
 State(IL): 2
 Local: 0

Earnings Statement

PAY Period:
 06/29/2008 to 07/12/2008
 Advice Date:
 07/18/2008
 Advice Number:
 0001034220
 Batch Number:
 BO830001

Ronald Daniel
 5820 Huron St
 Berkeley, IL 60163-0000

Earnings	Rate	Hours	This Period	Year-to-Date
Reg Earn	8.650	84.25	728.76	
Bonus Misc			379.40	
MED REIMB			223.12	
OTSERVC			118.00	
SPIFF Comm			482.25	
Holiday	30.950	8.00	247.60	
Personal	30.950	16.00	495.20	
Gross Pay			1672.67	

Deductions	Statutory	
Federal Withholding Tax	-287.75	-5050.25
Social Security Tax	-151.38	-2393.21
Medicare Tax	-35.40	-559.70
IL Withholding Tax	-68.63	-1075.65
Total Tax Deductions:	-543.16	-4078.81

Leave Accrual Balances			
Leave Type	Carryover	Earned	Taken
Sick	0.00	28.00	24.00
Vacation	0.00	33.35	0.00
Personal	0.00	18.69	32.00
			-13.31

Important Notes

Taxable Wage Base		
Federal Withholding Tax	2441.65	37777.87
Social Security Tax	2441.65	38600.12
Medicare Tax	2441.65	38600.12
IL Withholding Tax	2441.65	37777.87

Deductions	Other	
401K Loan	-48.73	-730.95
LTD	-3.50	-50.10
*Medical	-194.12	-2557.45
*Dental	-29.00	-387.60
*Vision	-9.56	-127.50
DP DTL	0.00	-40.50
Op Med	0.00	-308.10

ASSOCIATE NAME: SHANA H KING		PIN NO: 9507	
TAX STATUS EXEMPT		CHECK DATE: 04/18/2008	
FICA-MED FICA-OASDI FED INC TX IL STATE	M O S S	CHECK NUMBER: 0986545	
HR OR PAY QUESTIONS? 1-866-MYHDIR OR MYHDIR@HOMEDEPOT.COM			
DESCRIPTION RATE HOURS CURRENT YEAR-TO-DATE		DEDUCTIONS	
		TAXES	
DESCRIPTION CURRENT YEAR-TO-DATE		DESCRIPTION CURRENT YEAR-TO-DATE	
REGULAR REGULAR REG ADJUST	\$.50 \$.50 .00	37.00 39.50 .00	351.50 375.25 52.25
			1,087.75 1,463.00 17.19
			10.54 45.08 14.98 17.19
			21.97 53.95 36.14 36.23
GROSS PAY: HOME DEPOT U.S.A. INC.		NET PAY:	628.98 1,398.96

ASPIRE

4365		333		King, S. H.		04/23/2008							
EMPLOYEE NO.		DEPARTMENT		EMPLOYEE NAME		SOCIAL SECURITY NO.		PERIOD END					
EARNINGS		HRS UNITS		CURRENT AMOUNT		YEAR TO DATE		CHECK NO.					
Regular Pay	Shift Differ'l	46.250	0.000	431.52 13.88	3154.09 106.44	FEDERAL INCOME FEDERAL MEDICAR FEDERAL SOCIAL ILLINOIS AFSCME Dues 486	18.92 6.46 27.61 10.86 11.51	165.06 50.78 217.08 85.05 91.76					
PAY RATE	9.33	CURRENT EARNINGS	445.40	CURRENT DEDUCTIONS	75.36	NET PAY	370.04	Y.T.D. EARNINGS	3501.51	Y.T.D. DEDUCTIONS	609.73	Y.T.D. NET PAY	2891.78

Aspire 2 B Green. Get the Ideal!! Do it Green!!!

Vacation Balance: 0.00

Illness Balance: 2.76

Personal Balance: 0.00

WCK8511TP PICTURE PERFECT FORMS + 847-582-8003

Total Points: 30.00

0-61 acceptable

62 - written warning

63 - suspension

74 - termination of employment

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ESS Home MSS Home Contacts Log Off

Ronald Daniel

Myself

- Address/phone numbers
- Emergency Contact
- Personal Information
- Professional Information

My Money

- Direct Deposit
- Paystub view
- PTO Balance
- Taxes

My Benefits

- Benefit Summary
 - Dependent
 - Family Status Change
 - Update Life/LTD Insurance
 - Enrollment
 - FSA
- My Tasks
- Password Maintenance
 - Change Security Answer



CarMax Auto Superstores Inc.
12800 Tuckahoe Creek Pkwy
Richmond, VA 23238-0000

Earnings Statement

Pay 04/06/2008
Period: 04/19/2008
Advice 04/25/2008
Date: Number: 961190

Personal Tax Exemptions

Taxable Marital Status: Married
Federal: 2
State: IL 2
Local: 0

Ronald Daniel
5820 Huron St
Berkeley IL 60163-0000
Employee ID : 115499

	Earnings	Rate	Hours	This Period	Year-to-Date
Regular Earnings	8.65	99.00		856.35	
Spiff Commissions				630.00	
Overtime Service	4.32	19.00		187.91	
Consultants Medical/ Dental Reimbursement				223.12	
Bonus Miscellaneous				472.00	

* This earning increases taxable gross only.

Gross Pay **2,369.38** ~~25,487.73~~

Taxable Wage Base This Year-to-Period Date

Deductions Statutory	This Period	Year-to-Date
Federal Withholding	232.81	3,234.48
Federal SocSec/Disability	132.48	1,476.30
Federal Medicare	30.98	345.26
IL Withholding	56.26	663.26

<https://www.mykmxhr.com/payroll.go>

5/7/08

Richmond, VA 23238-0000	Employee ID :	115499
This Amount: One Thousand Five Hundred Twenty-Four and 63/100 ** \$ 1,524.63		
Pay Ronald to the Daniel order 5820 Huron of: St		

<https://www.mykmxhr.com/payroll.go>

5/7/08

Certificate Number: 00437-ILN-CC-004431447

CERTIFICATE OF COUNSELING

I CERTIFY that on July 14, 2008, at 11:03 o'clock AM MDT,

Shana King received from

Black Hills Children's Ranch, Inc.,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: July 14, 2008 By /s/George Dye

Name George Dye

Title Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Title Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 00437-ILN-CC-004437060

CERTIFICATE OF COUNSELING

I CERTIFY that on July 14, 2008, at 5:50 o'clock PM MDT,

Ronald Daniel received from

Black Hills Children's Ranch, Inc.,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the
Northern District of Illinois, an individual [or group] briefing that complied
with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of
the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: July 14, 2008 By /s/Max Edwards
Name Max Edwards
Title Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy
Code are required to file with the United States Bankruptcy Court a completed certificate of
counseling from the nonprofit budget and credit counseling agency that provided the individual
the counseling services and a copy of the debt repayment plan, if any, developed through the
credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

IN RE:

Daniel, Ronald & King, Shana

Debtor(s)

Case No. _____

Chapter 7 _____

DECLARATION REGARDING ELECTRONIC FILING

Signed by Debtor(s) or Corporate Representative
To Be Used When Filing over the Internet

PART I - DECLARATION OF PETITIONER

A. To be completed in all cases.

Date: _____

I(We) Ronald Daniel and Shana King, the undersigned debtor(s), corporate officer, partner, or member, hereby declare under penalty of perjury that the information I(we) have given my (our) attorney, including correct social security number(s) and the information provided in the electronically filed petition, statements, schedules, and if applicable, application to pay filing fee in installments, is true and correct. I(we) consent to my(our) attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I(we) understand that this DECLARATION must be filed with the Clerk in addition to the petition. I(we) understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.

B. To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.

I(we) am(are) aware that I(we) may proceed under chapter 7, 11, 12, or 13 of Title 11 United States Code; I(we) understand the relief available under each such chapter; I(we) choose to proceed under chapter 7; and I(we) request relief in accordance with chapter 7.

C. To be checked and applicable only if the petition is a corporation, partnership, or limited liability entity.

I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in the petition.

Signature:

Ronald Daniel
(Debtor or Corporate Officer, Partner or Member)

Signature:

Shana King
(Joint Debtor)